



January 28, 2022

The Honorable Delegate Shane E. Pendergrass  
House Health & Government Operations Committee  
House Office Building - Room 241  
Annapolis, MD 21401

RE: Oppose – HB 276: Health Occupations - Clinical Nurse Specialists - Prescribing Authority

Dear Chairman Pendergrass and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens; and strive through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS and WPS represent over 1000 psychiatrists and physicians currently in psychiatric training.

MPW/WPS urge you to oppose House Bill 276: Health Occupations - Clinical Nurse Specialists - Prescribing Authority (HB 276), which would authorize clinical nurse specialists (CNSs) to prescribe controlled substances, including opioids, without explicitly requiring a physician's involvement. While CNSs are valuable members of the health care team, Maryland simply should not authorize them to prescribe without physician involvement.

Medicare patient safety requirements<sup>1</sup>, for example, require CNSs to work in collaboration with a physician; in the absence of a state law about collaboration, CNSs must still work in collaboration with a physician to be reimbursed. HB 276 does not make sense for Maryland patients since our myopic laws only require advanced practice nurses to collaborate with physicians for the first eighteen months of their practice. If Medicare, one of the largest payers in our nation, requires CNSs to work in collaboration with physicians at all times, Maryland law should specify this relationship as well and not delegate that decision to the Board of Nursing.

Maryland patients are best served when medications are prescribed with physician involvement. Regarding psychiatric medications, specifically, these powerful drugs do not stop at the patient's brain; they affect many systems of the body such as the heart, lungs, stomach, and kidneys. Seriously disabling or deadly side-effects of the medications can occur if psychiatric medications are prescribed and managed improperly. Furthermore, patients

---

<sup>1</sup> 42 C.F.R. § 410.76



**Washington  
Psychiatric Society**

needing more than one drug at a time for comorbid physical conditions, such as heart disease or diabetes and mental illness, are at risk for potentially serious drug interactions. More than half of all patients with a mental disorder also have one or more physical ailments. For patient safety purposes, CNSs working in a health care team that includes a physician is imperative.

Additionally, HB 276 does not provide limits as to the type of medications a CNS could prescribe, which means they would be authorized to prescribe opioids and narcotics. Maryland is already facing an opioid epidemic, and confronting this epidemic includes making sure opioids are not overprescribed. Adding additional health care providers to the list of those who may prescribe without physician involvement is not the answer to combatting over-prescribing.

For all the reasons above, MPS/WPS urges this honorable committee to give an unfavorable report to HB 276. MPS/WPS would welcome the opportunity to work with the sponsor, committee, and proponents to facilitate evidence-based, proven programs such as Collaborative Care or telehealth that can assist Maryland patients experiencing mental illness or substance use disorders.

If you have any questions with regard to this testimony, please feel free to contact Thomas Tompsett Jr. at [tommy.tompsett@mdlobbyist.com](mailto:tommy.tompsett@mdlobbyist.com).

Respectfully submitted,  
The Maryland Psychiatric Society and the Washington Psychiatric Society  
Legislative Action Committee